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De	ebtor 1 Sanchez, Hiram Lope)Z	Case numb	DEF (if known)	
12.	Within 1 year before you filed fo	or bankruptcy, v stodian, or anoth	was any of your property in the possession of an ner official?	n assignee for the benefit	of creditors, a
	■ No □ Yes				
Pa	rt 5: List Certain Gifts and Co	ntributions			
13.	Within 2 years before you filed	for bankruptcy,	did you give any gifts with a total value of more	than \$600 per person?	
	No Yes. Fill in the details for each				
	Gifts with a total value of more person	than \$600 per	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Address:	Gift and			
14.	■ No		did you give any gifts or contributions with a to	tal value of more than \$6	600 to any charity?
	☐ Yes. Fill in the details for each Gifts or contributions to chariful more than \$600 Charity's Name Address (Number, Street, City, State	ties that total	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses	·			
15.	Within 1 year before you filed for gambling?	or bankruptcy o	r since you filed for bankruptcy, dld you lose an	ything because of theft,	fire, other disaster,
	No Yes. Fill in the details. Describe the property you lost how the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 ofSchedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or	Transfers			
16.	consulted about seeking bankr	uptcy or prepari	did you or anyone else acting on your behalf pay ing a bankruptcy petition? s, or credit counseling agencies for services required		y to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Paymer	nt if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Ronald D. Halpern, Attorn 30011 Ivy Glenn Dr # 112 Laguna Niguel, CA 92677-	ey at Law	0.00	10/8/18	\$1,015.00
17.	Within 1 year before you filed f promised to help you deal with Do not include any payment or tra	your creditors of	did you or anyone else acting on your behalf pay or to make payments to your creditors? ed on line 16.	or transfer any property	/ to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
18	Within 2 years before you filed	for bankruntey	did you sell trade or otherwise transfer any nr	onarty to anyona other t	han property

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

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Det	otor 1 Sanchez, Hiram Lopez		Case	number (if known)						
	transferred in the ordinary course of your but include both outright transfers and transfers may gifts and transfers that you have already listed on No Yes Fill in the details	de as security (such as the		interest or mortgage on your pro	operty). Do not include					
		B	to a set	N	D-4- 4					
	Person Who Received Transfer Address	Description and va property transferre	id p	Describe any property or payments received or debts paid in exchange	Date transfer was made					
	Person's relationship to you			-						
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)									
	■ No □ Yes. Fill in the details.									
	Name of trust	Description and va	lue of the property t	transferred	Date Transfer was made					
Par	rt 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit B	oxes, and Storage U	Jnits						
20					us banafit alasad					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.									
	No Yes, Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed for b	ankruptcy, any safe	deposit box or other deposit	tory for securities,					
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str and ZIP Code)		cribe the contents	Do you still have it?					
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	■ No									
	Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, Strand ZIP Code)		cribe the contents	Do you still have it?					
Pai	rt 9: Identify Property You Hold or Control	for Someone Else								
23.	Do you hold or control any property that so someone.	meone else owns? Includ	e any property you	borrowed from, are storing for	or, or hold in trust for					
	No Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, St Code)		cribe the property	Value					
Pa	nt 10: Give Details About Environmental Info	ormation								
For	the purpose of Part 10, the following definition	ons apply:								
	Environmental law means any federal, state		ation concerning po	llution, contamination, releas	es of hazardous or					
	toxic substances, wastes, or material into the	he air, land, soll, surface v	vater, groundwater,	or other medium, including s	tatutes or regulations					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Official Form 107

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Deb	otor 1	Sanchez, Hiram Lopez		Ca	ise number(if known)	· · · · · · · · · · · · · · · · · · ·
	contr	olling the cleanup of these substance	es, wastes, or material.			
		neans any location, facility, or proper operate, or utilize it, including dispos	ty as defined under any environment al sites.	tal law, v	whether you now own, operate,	or utilize it or used to
		rdous material means anything an en rial, pollutant, contaminant, or similal	vironmental law defines as a hazardo r term.	ous wast	te, hazardous substance, toxic s	substance, hazardous
₹өрс	ort all	notices, releases, and proceedings tl	hat you know about, regardless of wh	en they	occurred.	
24.	Has a	ny governmental unit notified you th	at you may be liable or potentially lia	ble unde	er or in violation of an environm	ental law?
		No				
		Yes. Fill in the details.				
		e of site 'ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, Sta ZIP Code)	te and	Environmental law, if you know it	Date of notice
25.	Have	you notified any governmental unit o	of any release of hazardous material?	1		
		No				
		Yes. Fill in the details.				
	Nam	e Of Site 1988 (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, Sta ZIP Code)	te and	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or ac	iministrative proceeding under any e	nvironm	nental law? Include settlements	and orders.
		No				
		res. Fill in the details.				
		Title Number	Court or agency Name Address (Number, Street, City, Sta		ture of the case	Status of the case
			and ZIP Code)			
Par	t 11:	Give Details About Your Business o	r Connections to Any Business			
27.	Withi	n 4 years before you filed for bankru	ptcy, did you own a business or have	any of t	the following connections to an	y business?
	ı	A sole proprietor or self-employed	in a trade, profession, or other activ	ity, eithe	er full-time or part-time	
	I	A member of a limited liability com	npany (LLC) or limited liability partne	rship (Ll	LP)	
		☐ A partner in a partnership				
	ĺ	🗖 An officer, director, or managing e	executive of a corporation			
	ı	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation	on		
		No. None of the above applies. Go to	Part 12.			
	· 🗆	res. Check all that apply above and f	III in the details below for each busine	9 55.		
		ness Name	Describe the nature of the busine		Employer Identification numb)er
	Addı (Numi	ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeep	er	Do not include Social Securit Dates business existed	y number or ITIN.
28.		n 2 years before you filed for bankru utions, creditors, or other parties.	ptcy, did you give a financial stateme	nt to any		ude all financial
		No				
	□ '	Yes. Fill in the details below.				
	Nam Addi (Numi		Date Issued			
Par	t 12:	Sign Below				

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Sanchez, Hira	ım Lopez	Case number(if known)
bankruptcy case can result 18 U.S.C. §§ 152, 1341, 1519	in fines up to \$250,000, or imprisonment for up), and 3571.	to 20 years, or both.
/s/ Hiram Lopez Sanch Hiram Lopez Sanchez Signature of Debtor 1	ez Signature of De	btor 2
Date November 5, 20	18 Date	
Did you attach additional po ■ No □ Yes	ages to Your Statement of Financial Affairs for a	ndividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay ■ No	r someone who is not an attorney to help you fi	i out bankruptcy forms?
☐ Yes Name of Person	Attach the Bankruntov Petition Prenarer's Notice	ce Declaration and Signature (Official Form 119)

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Fill in this	s information to identif	y your case:		
Debtor 1	Hiram Lanaz San	cho-		
Debitor 1	Hiram Lopez San	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
Limited Other Deep		CENTRAL DISTR	CT OF CALIFORNIA CANTA ANA DIVIRIONI	
United States Ban	kruptcy Court for the:	CENTRAL DISTR	ICT OF CALIFORNIA, SANTA ANA DIVISION	
Case number				
(if known)				Check if this is an
				amended filing
Official For	m 108			
Statemen	t of Intentio	n for Indiv	iduals Filing Under Chapt	er 7 12/15
Otatemen	t or intentio	ii ioi iiidi	riddais i iirig Onder Onapt	12/15
			and the forms of	
*	idual filing under chap	· •	out this form it:	
creditors have	claims secured by you	ır property, or		
	d personal property a			
			ou file your bankruptcy petition or by the date set	
wnicnev the form	•	e court extends the	time for cause. You must also send copies to the	creditors and lessors you list on
the form				
		in a joint case, bot	h are equally responsible for supplying correct info	ormation. Both debtors must sign
and date	the form.			
Re as complete an	nd accurate as nessible	o If more snace is	needed, attach a separate sheet to this form. On the	e top of any additional nages
	ur name and case num		medisa, attach a separate sheet to this form. Of the	top of any doditional pages,
••		., ,		
Part 1: List Yo	ur Creditors Who Have	Secured Claims		
4 F	an Almania - Nada akta Ma		Out different 1475 - 1 Investor Obstant Command has December 1	O46-1-1 F 400D) EII i 41
information below	•	iri i oi acheudie D:	Creditors Who Have Claims Secured by Property (Official Form 100D), fill in the
The state of the s	ditor and the property th	hat is collateral	What do you intend to do with the property that	Did you claim the property
			secures a debt?	as exempt on Schedule C?
a 177 1			_	
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	☐ Yes
Description of			Retain the property and enter into a Reaffirmation	La res
property			Agreement.	
securing debt:			Retain the property and [explain]:	
securing debt.				_
Creditor's			□ Surrander the preparty	□No
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	□ Nb
Hame,			☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation	. □ Yes
Description of			Agreement.	
property			Retain the property and [explain]:	
securing debt:				
•				_
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
•			Retain the property and enter into a Reaffirmation	yes □ Yes
Description of			Agreement.	
property			Retain the property and [explain]:	
securing debt:				
Creditor's			☐ Surrender the property.	□ No
			· · · · · · · · · · · · · · · · · · ·	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Debtor 1 Sanchez, Hiram Lopez	Case number (if known)	
name: Description of	☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation	□ Yes
property	Agreement. Retain the property and [explain]:	
securing debt:		-
Part 2: List Your Unexpired Personal Prop	erty Leases	, <u>, , , , , , , , , , , , , , , , , , </u>
For any unexpired personal property lease that the information below. Do not list real estate le	at you listed in Schedule G: Executory Contracts and Unexpired eases. Unexpired leases are leases that are still in effect; the leas lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your unexpired personal property le	Bases	Will the lease be assumed?
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have property that is subject to an unexpired lease	indicated my intention about any property of my estate that sect	ures a debt and any personal
X /s/ Hiram Lopez Sanchez	×	
Hiram Lopez Sanchez Signature of Debtor 1	Signature of Debtor 2	
Date November 5, 2018	Date	

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Fill in th	is information to identify your case:	Check one box only as directed in this form and in Form	
		122A-1Supp:	
Debtor	1 Hiram Lopez Sanchez	- -	
Debtor : (Spouse, i		_ ☐ 1. There is no presumption of abuse	
(Opodoc, i	Central District of California, Santa	2. The calculation to determine if a presumption of abus	e
United 9	States Bankruptcy Court for the: Ana Division	applies will be made underChapter 7 Means Test	ļ
0		Calculation (Official Form 122A-2).	
(if known)		 3. The Means Test does not apply now because of qualifit military service but it could apply later. 	ed
		☐ Check if this is an amended filing	
Offici	ial Form 122A - 1	D Officer if this is an afficiace ming	
		alv Incomo	
Gna	oter 7 Statement of Your Current Month	ny income 12	/15
a separat number (mplete and accurate as possible. If two married people are filing together, both the sheet to this form. Include the line number to which the additional informating in known). If you believe that you are exempted from a presumption of abuse to the service, complete and file Statement of Exemption from Presumption of Abuse Calculate Your Current Monthly Income	ion applies. On the top of any additional pages, write your name and case because you do not have primarily consumer debts or because of qualifyi	
1. W	hat is your marital and filing status? Check one only.		
	Not married. Fill out Column A, lines 2-11.		
	Married and your spouse is filing with you. Fill out both Columns A an	nd B, lines 2-11.	
	Married and your spouse is NOT filing with you. You and your spous	se are:	ĺ
	Living in the same household and are not legally separated. Fill ou	ut both Columns A and B, lines 2-11.	
	Living separately or are legally separated. Fill out Column A, lines 2 penalty of perjury that you and your spouse are legally separated under apart for reasons that do not include evading the Means Test requireme	nonbankruptcy-law that applies or that you and your spouse are living	r
101(1 6 mor	the average monthly income that you received from all sources, derived durin 0A). For example, if you are filing on September 15, the 6-month period would be Months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not be same rental property, put the income from that property in one column only. If you	March 1 through August 31. If the amount of your monthly income varied during not include any income amount more than once. For example, if both spouses	the
		Column A Column B Debtor 1 Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, and commissions (byroli deductions).	before all \$ 6,391.46 \$ 5,472.48	•
	imony and maintenance payments. Do not include payments from a spo olumn B is filled in.	ouse if \$\$ 0.00\$	
of fro	I amounts from any source which are regularly paid for household ex you or your dependents, including child support. Include regular control an unmarried partner, members of your household, your dependents, par ommates. Include regular contributions from a spouse only if Column B is not include payments you listed on line 3	tributions	
5. N e	et income from operating a business, profession, or farm		
	Debtor	1	
Gi	ross receipts (before all deductions) \$ 0.00		
	rdinary and necessary operating expenses -\$0.00		
i .		opy here -> \$ \$ 0.00	
6. N e	et income from rental and other real property Debtor	.1	
	ross receipts (before all deductions) \$ 0.00	•	
	rdinary and necessary operating expenses -\$ 0.00		
ì	· · · · · · · · · · · · · · · · · · ·	opy here -> \$ 0.00 \$ 0.00	,
i i	torget dividends and royalties	s 0.00 \$ 0.00	

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Debto	Sanchez, Hiram Lopez			Case numbe	(if known)		
				Column A Debtor 1		Column B Debtor 2 or	
8.	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amount of Social Security Act. Instead, list it here:	received was a benefit	under the				
	For you	§ 0	.00				
	For your spouse		.00				
	Pension or retirement income. Do not include any am under the Social Security Act.			\$	0.00	s	0.00
	Income from all other sources not listed above. Spenot include any benefits received under the Social Secura victim of a war crime, a crime against humanity, or intellif necessary, list other sources on a separate page and p	ity Act or payments rec rnational or domestic to	eived as				
				\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separate pages, if any.			\$ <u></u>	0.00	\$	0.00
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to	nes 2 through 10 for otal for Column B.	\$	5,391.46	† \$_	5,472.48	\$ 11,863.94
Рап	2: Determine Whether the Means Test Applies t	o You					Income
12.	Calculate your current monthly income for the year	. Follow these steps:					
	12a. Copy your total current monthly income from line	11		Сору	/ line 11 h	iere=>	\$11,863.94_
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	· form				12b.	\$142,367.28
13.	Calculate the median family income that applies to	you. Follow these step	s:				
	Fill in the state in which you live.	CA					
	Fill in the number of people in your household.	5					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy	online using the link s	pecified in	the separat	e instructi	13. ons for this	\$ 99,749.00
14.	How do the lines compare?						
	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	In the top of page 1, cl	heck box	There is no p	presumptio	on of abuse.	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	The presu	mption of ab	use is det	ermined by Fo	rm 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury to the signing here, I declare under penalty of perjury to the significant of the significant in the significant	-	this staten	nent and in a	ny attachm	ents is true ar	id correct.
	If you checked line 14h, fill out Form 1224-2 and	file it with this form					

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Fill in this information to identify your case:	Check the appropriate box as directed in
Debtor 1 Hiram Lopez Sanchez	lines 40 or 42:
Debtor 2 (Spouse, if filing)	According to the calculations required by this Statement:
Central District of California, Santa United States Bankruptcy Court for the: Ana Division	■ 1. There is no presumption of abuse.
Case number	2. There is a presumption of abuse.
(if known)	☐ Check if this is an amended filing
Official Form 122A - 2	
Chapter 7 Means Test Calculation	04/16
To fill out this form, you will need your completed copy of Chapter 7 Stateme	ent of Your Current Monthly Income (Official Form 122A-1).
To the dat this form, you will hook your domploted dopy of oraptor / datemen	
Be as complete and accurate as possible. If two married people are filing toge is needed, attach a separate sheet to this form, include the line number to wh	
write your name and case number (if known).	ion additional information applies. On the top any additional pages,
Part 1: Determine Your Adjusted Income	

1. Copy your total current monthly income. Copy line 11	from Official Form 122A-1 here=> \$ 11,863.94
2. Did you fill out Column B in Part 1 of Form 122A-1?	· ·
☐ No. Fill in \$0 for the total on line 3.	
Yes. Is your spouse Filing with you?	
■ No. Go to line 3.	
Yes. Fill in \$0 the total on line 3.	
Adjust your current monthly income by subtracting any part of your sp household expenses of you or your dependents. Follow these steps:	ouse's income not used to pay for the
On line 11, Column B of Form 122A-1, was any amount of the income you repyou or your dependents?	ported for your spouse NOT regularly used for the household expenses of
□ No. Fill in 0 for the total on line 3.	
Yes. Fill in the information below:	
State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	Fill in the amount you are subtracting from your spouse's income
Retained by spouse	\$
	_ \$
	_ \$
Total.	§ 706.17
Total.	Copy total here=> \$
4. Adjust your current monthly income. Subtract line 3 from line 1.	s <u>11,157.77</u>

Official Form 122A-2

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ebtor 1	Sanchez, Hiram Lopez		_	Case number (i	f known)		
art 2:	Calculate Your Deductions from Your Income						
answe	Calculate Your Deductions from Your Income The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to inswer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions or this form. This information may also be available at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your solution of deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1. If your expenses differ from month to month, enter the average expense. Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of Housing 15 Living O Housing National Standards You must use the IRS National Standards to answer the questions in lines 6-7. 2,051.00 18 Pood, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards. S 2,051.00						
actual	expenses if they are higher than the standards. Do not de	duct any a	mounts tha	it you subtracted fro	your spouse'	use some of yos income in lin	our e 3
If your	expenses differ from month to month, enter the average e	expense.					
When	ever this part of the from refers to you, it means both you	and your s	spouse if (Column B of Form 12	2A-1 is filled	l in.	
5. T	he number of people used in determining your dedu	ctions fro	m income				
n	iumber of any additional dependents whom you support. T						
Natio	nal Standards You must use the IRS National	Standards	s to answe	r the questions in lin	es 6-7		
			entered ir	line 5 and the IRS N	National Star	ndards, \$	2,051.00
ti p	he dollar amount for out-of-pocket health care. The numbe people who are 65 or olderbecause older people have a h	er of people nigher IRS	e is split in allowance	o two categoriesper for health care costs.	ople who are	under 65 and	
Peopl	e who are under 65 years of age						
7	a. Out-of-pocket health care allowance per person	\$	52				
7	7b. Number of people who are under 65	×					
7	7c. Subtotal. Multiply line 7a by line 7b.	\$	260.00	Copy here	=> \$	260.00	
Peop	e who are 65 years of age or older						
7	7d. Out-of-pocket health care allowance per person	\$	114				
ī	7e. Number of people who are 65 or older	x	0				
-	7f. Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here	=> +\$	0.00	
;	7g. Total. Add line 7c and line 7f			\$ 260.00	Сору	total here=>	\$